

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ~~RECEIVED~~ MI
NORTHERN DIVISION

2006 AUG 31 P 4:45

DERON L. BARNETT ;
Plaintiff, Pro Se ;
v. ;
REGIONS BANK ;
Defendant. ;

CECILIA R. HACKETT, CLERK
MIDDLE DISTRICT OF MI

CIVIL ACTION NO. 2:06cv725MHT
(WO)

Comes now the plaintiff Deron Barnett to show
just cause of lawsuit against the defendant. Here
is my evidence to show how I was first treated
unjust by the Courts. Here is a copy of my AAA
Papers that were filed with the Association, your Honor
I'm not attorney so I'm going to keep simple and
to the point. Regions wants my case dismissed
because the court ruled I didn't file for Arbitration.
Here is a copy for the time I did, with the Notary Seal
at the time I was asked to file I was closing my case
Pro Se, like as of now. I filed a motion for a hearing
to tell the Judge that they wanted \$18,000 plus whether
+ ... - but. At the hearing the defendant did

I don't want settle or Negotiate the suit, it was disturbing that my case was dismissed after the Judge called the AAA at the hearing, and they told him, yes your Honor he did file. I have copies of withdrawals slips that are not on my statement, my safe deposit card and AVX signatures that a Handwriting expert picked out 4 or 5 signatures that are not mine. The defendant is trying very hard to keep this matter from going to court after I went to them very humble in the beginning. PLEASE your court don't let the BANK just take my finances like that.

Jeroy Z. Barnett

8-31-06

3937 Piedmont Ct
Montgomery, Al. 36108

I hereby certify that on this 31 day of Aug, 2006, a copy of this Certificate of Service was mailed, postage prepaid, to Regions Bank 8 Commerce St.

Deron Z. Barnett



American Arbitration Association
Dispute Resolution Services Worldwide

Southeast Case Management Center
Chauncey B. Davis
Vice President

October 14, 2005

2200 Century Parkway, Suite 300, Atlanta, GA 30345
telephone: 404-325-0101 facsimile: 404-325-8034
internet: <http://www.adr.org/>

VIA U.S. MAIL

Deron L. Barnett
3937 Piedmont Ct.
Montgomery, AL 36108

Re: 30 459 00827 05

Deron L. Barnett
and
Regions Bank

Dear Parties:

As of this date we have not received the required signed agreement for this matter. Therefore, we are this date closing our files.

If at some point in the future the parties agree to submit this matter under the procedures of the AAA, please refile your Demand with the arbitration clause, along with the appropriate filing fees, and we will commence administration.

Very truly yours,

A handwritten signature in black ink, appearing to read "Lillie Harris".

Lillie Harris
Case Assistant
800 925 0155
Harrisl@adr.org

Brenda Donald
Intake and Financial Supervisor
888 320 3496
Donaldb@adr.org

cc: Charles Patterson, Regions Bank, via u.s. mail

American Arbitration Association Affidavit in Support of Reduction or
Deferral of Filing and Administrative Fees

Name: Deron L. BarnettAge: 38Address: 3937 Piedmont Ct. Mtgy. AL 36108

Spouse:

Dependents: 3

Employer:

Salary:

Other Sources
& Amounts of

Income:

Assets:Bank: None

Checking: _____

Bank: _____

Savings: _____

Home: None

Value: _____

Other: _____

Value: _____

Automobile: DodgeMake: Shadow Year: 90Value of Stocks: NoneBonds: None CD's: NoneRetirement (IRA, 401k, etc.): NoneOther: None**Liabilities:**

Rent or Mortgage	\$ <u>350.00</u>	\$ _____
Automobile	\$ _____	\$ _____
Medical	\$ _____	\$ _____
Other: <u>Storage</u>	\$ <u>40.00</u>	\$ _____
Other:	\$ _____	\$ _____

I have no other sources of income other than those indicated above, and I do not have assets sufficient to pay the American Arbitration Association's filing and administrative fees. Any other facts or circumstances, which support my position that I am unable to pay such fees, are indicated on additional correspondence or papers which are attached and are incorporated into this affidavit.

I hereby swear that the foregoing is a true and correct statement of my financial condition and by ability to pay.

Deron L. Barnett
Signature

Sworn to before me this 30 day of June, 2005

Frances D. Riley QH
Notary Public

FRANCESTER D. RILEY-ROBINSON
Notary Public, AL State at Large
My Comm. Expires Feb. 18, 2009

The AAA will not retain any copies or originals of documents or information submitted by a party in connection with their hardship request, except for information such as whether a hardship request was granted, and the amount of the waiver or deferral. Accordingly, please indicate below where the AAA should mail such materials:

Name: Deron L. Barnett

Address: 3937 Piedmont

City: Mtgy. State: AL Zip Code: 36108

If no return address is filled in above, all documentation will be destroyed within 10 days of the AAA's hardship determination.

American Arbitration Association**Commercial**

(Enter the name of the applicable rules.)

ARBITRATION RULES*

To institute proceedings, please send two copies of this demand *and the arbitration agreement*, with the filing fee as provided in the rules, to the AAA. Send the original demand to the respondent.

DEMAND FOR ARBITRATION

To: Name Regions Bank DATE: 6-29-05
 Address 8 Commerce St.
 (of the Party on Whom the Demand Is Made)
 City and State Mtgy. Al. ZIP Code _____
 Telephone () 1-800-734-4667 Fax () _____
 Name of Representative _____
 (if Known)
 Representative's Address _____
 Name of Firm (if Applicable) _____
 City and State _____ ZIP Code _____
 Telephone () _____ Fax () _____

The below named claimant, a party to an arbitration agreement contained in a written contract dated _____ and providing for arbitration under the _____ Arbitration Rules of the American Arbitration Association, hereby demands arbitration thereunder.

THE NATURE OF THE DISPUTE: The bank let someone withdraw money from my account, and also my safe deposit box.

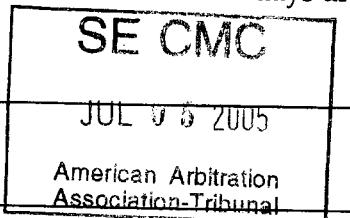
THE CLAIM OR RELIEF SOUGHT (the Amount, if Any):

Mandatory damages TYPES OF BUSINESS: Claimant Consumer Respondent Regions Bank
 HEARING LOCALE REQUESTED: Montgomery, AL (City and State)

DOES THIS DISPUTE ARISE OUT OF AN EMPLOYMENT RELATIONSHIP? Yes No

You are hereby notified that copies of our arbitration agreement and this demand are being filed with the American Arbitration Association at its Atlanta, GA regional office with a request that it commence administration of the arbitration. Under the rules, you may file an answering statement within fifteen days after notice from the administrator.

Signed Deron L. Barnett Title _____
 (May Be Signed by a Representative)



Name of Claimant Deron L. Barnett
 Address (to Be Used in Connection with This Case) 3937 Piedmont Ct.
 Name of Firm (if Applicable) _____
 City and State Montgomery, Alabama ZIP Code 36108
 Telephone (334) 288-1031 Fax () _____

Name of Representative _____
 Representative's Address _____
 City and State _____ ZIP Code _____
 Telephone () _____ Fax () _____



MEDIATION is a nonbinding process. The mediator assists the parties in working out a solution that is acceptable to them. If you wish for the AAA to contact the other parties to ascertain whether they wish to mediate this matter, please check this box or list them on the back (there is no additional administrative fee for this service).

* If you have a question about which rules apply or the address of the nearest regional office, please contact the AAA (1-800-778-7879).

**AMERICAN ARBITRATION ASSOCIATION
SUPPLEMENTARY PROCEDURES FOR
CONSUMER-RELATED DISPUTES**

How to file a claim; consumers should:

- Fill out this form and retain one copy for your records.
- Mail two copies of this form and your check or money order made payable to the AAA, to the AAA Case Management Center nearest to you. Please consult Section C-8 of the *Supplementary Procedures for Consumer-Related Disputes* for the appropriate fee.
- Send a copy of this form to the business.

How to file a claim; businesses should:

- Fill out this form and retain one copy for your records.
- Mail two copies of this form and your check or money order made payable to the AAA, to the AAA Case Management Center nearest to you. Please consult Section C-8 of the *Supplementary Procedures for Consumer-Related Disputes* for the appropriate fee.
- Send a copy of this form to the consumer by registered mail return receipt requested.

1 How is this claim being filed? Check only one.

By request of the consumer (A copy of the arbitration agreement **must** be attached. A copy of this form **must** also be sent to the business)

By request of the business (A copy of the arbitration agreement **must** be attached. A copy of this form **must** also be sent to the consumer by registered mail return receipt requested)

-or-

By mutual agreement ("submission") of the parties (both parties **must** sign this form)

2 Briefly explain the dispute.

They let someone take money out of my account & safe deposit box.

3 Do you believe there is any money owed to you? If yes, how much?

4 Is there any other outcome you want? Yes No
If yes, what is it?

5 *Montgomery*
Preferred hearing locate (if an in-person hearing is held)

Montgomery, Al.

6 Fill in the following information

Consumer

Name of Consumer *Beroul Barnett*
Address *3937 Piedmont Ct.*
City/State/Zip *Montgomery, Al. 36108*
Telephone *334-288-1031*

Fax _____

Signature of Consumer *Beroul Barnett*

Representative _____

Firm _____

Address _____

City/State/Zip _____

Telephone _____

Fax _____

Business

Name of Business _____

Address _____

City/State/Zip _____

Telephone _____

Fax _____

Signature of Business _____

Representative _____

Firm _____

Address _____

City/State/Zip _____

Telephone _____

Fax _____

SE CMC

JUL 05 2005

**American Arbitration
Association-Tribunal**

se 2.0
NFM 7.80

CHARTERED ACCOUNTANT

Regions Bank

Closing Date
03/31/03

Account Number
62-63152-87

Types
SETINGS

Ending Balance Last Statement	Total Amount Deposits and Credits	Total Withdrawals	Account Charges	Balance as of Closing Date
• 30	11,437.07		.07	.00
DATE	ACTIVITY	\$ AMOUNT	BALANCE	
12/31/02	BALANCE			
01/06/03	DEPOSIT	6.00	6.00	
01/07/03	SUPP SEC US TREASURY 310	1,650.00	1,656.00	
01/07/03	WITHDRAWAL	1,600.00	56.00	
01/13/03	WITHDRAWAL	50.00	6.00	
01/16/03	WITHDRAWAL	5.00	1.00	
01/31/03	SUPP SEC US TREASURY 310	169.00	170.00	
01/31/03	WITHDRAWAL	165.00	5.00	
02/04/03	SUPP SEC US TREASURY 310	6,626.00	6,629.00	
02/04/03	WITHDRAWAL	2,624.00	4,005.00	
02/04/03	WITHDRAWAL	4,005.00	0.00	
02/28/03	SUPP SEC US TREASURY 310	169.00	169.00	
02/28/03	WITHDRAWAL	149.00	20.00	
03/03/03	WITHDRAWAL	20.00	0.00	
03/12/03	SUPP SEC US TREASURY 310	2,819.07	2,819.07	
03/12/03	WITHDRAWAL	829.00	1,990.07	
03/13/03	WITHDRAWAL	995.00	995.07	
03/17/03	WITHDRAWAL	350.00	645.07	
03/17/03	WITHDRAWAL	600.00	45.07	
03/20/03	WITHDRAWAL	40.00	5.07	
03/27/03	WITHDRAWAL	5.00	0.07	
03/31/03	EXCESSIVE WITHDRAWAL FEE	.07	.00	
TOTAL INTEREST PAID TO ACCOUNT AS OF 03/31/03				.00
90 DAYS IN THIS STATEMENT CYCLE ANNUAL PERCENTAGE YIELD EARNED 0.05 %				
Please examine at once. If no error is reported within 30 days of the closing date, the account will be considered correct. Please advise us at once of any change in your address.				

TOTAL INTEREST PAID TO ACCOUNT
AS OF 03/31/03 .00

90 DAYS IN THIS STATEMENT CYCLE
ANNUAL PERCENTAGE YIELD EARNED 0.85 %

Please examine at once. If no error is reported within 30 days of the closing date, the account will be considered correct. Please advise us at once of any change in your address.

Regions Bank	Savings Account Withdrawal	Date <u>10/15/02</u>	Ons Bank	Savings Account Withdrawal	Date <u>10/17/02</u>
Name on Account <u>Deron L. Barnett</u>	Driv. Lic. # <u>5070843</u>	Signature <u>Deron L. Barnett</u>	Name on Account <u>Deron L. Barnett</u>	Driv. Lic. # <u>5070843</u>	Signature <u>Deron L. Barnett</u>
Address <u>3637 Piccinni Ct.</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>
Amount <u>100.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>
NOT NEGOTIABLE: Withdrawals may be made only through payment to the depositor.					
Account Number <u>* 626315287</u>					

Regions Bank	Savings Account Withdrawal	Date <u>10/17/02</u>	Ons Bank	Savings Account Withdrawal	Date <u>10/17/02</u>
Name on Account <u>Deron L. Barnett</u>	Driv. Lic. # <u>5070843</u>	Signature <u>Deron L. Barnett</u>	Name on Account <u>Deron L. Barnett</u>	Driv. Lic. # <u>5070843</u>	Signature <u>Deron L. Barnett</u>
Address <u>3637 Piccinni Ct.</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>
Amount <u>100.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>
NOT NEGOTIABLE: Withdrawals may be made only through payment to the depositor.					
Account Number <u>* 626315287</u>					

Regions Bank	Savings Account Withdrawal	Date <u>10/17/02</u>	Ons Bank	Savings Account Withdrawal	Date <u>10/17/02</u>
Name on Account <u>Deron L. Barnett</u>	Driv. Lic. # <u>5070843</u>	Signature <u>Deron L. Barnett</u>	Name on Account <u>Deron L. Barnett</u>	Driv. Lic. # <u>5070843</u>	Signature <u>Deron L. Barnett</u>
Address <u>3637 Piccinni Ct.</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>	Address <u>3937 N. Schmitz</u>
Amount <u>100.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>	Amount <u>40.00</u>
NOT NEGOTIABLE: Withdrawals may be made only through payment to the depositor.					
Account Number <u>* 626315287</u>					

② No #7.

WON
C/L
WON
C/L

Options Bank		Savings Account Withdrawal	Date	Amount
Time on Account	Duration	Driv. Lic. #	5010843	
Address	3630 Pickleman	Signature	1/15/03	
Amount Received	\$1,000.00	DT NEGOTIABLE: Withdrawals may be made only through payment to the depositor.		
Account Number	1313131313131313	Account Number		

Savings Account Withdrawal		Date <u>1-17-03</u>	Date <u>1-19-03</u>	Amount <u>500.00</u>
Options Bank	Savings Account Withdrawals	Date 1-19-03	Driv. Lic. # 5070842	Amount 250.00
on <u>Deron L. Barlett</u>	on <u>Bank 5070843</u>	Signature <u>Deron L. Barlett</u>	Signature <u>W.O. Kell, Branch</u>	
Res. <u>3937 Pechmont</u>	Res. <u>3937 Pechmont</u>	Amount <u>500.00</u>	Amount <u>500.00</u>	
Amount <u>Three thousand and 7.00</u>	Amount <u>Two thousand and 5.00</u>	Amount <u>626438204</u>	Amount <u>350.00</u>	
NEGOTIABLE: Withdrawals may be made only through payment to the depositor.				
NEGOTIABLE: Withdrawals may be made only through payment to the depositor.				

Savings Bank	Savings Account Withdrawal	Date	Amount
IONS Bank	Debra L. Barnes	1-20-03	200.00
IONS Bank	Debra L. Barnes	1-20-03	26438204
IONS Bank	Debra L. Barnes	1-20-03	626315297
			700.00

DATE **10/06**
MAP27-03 03:01 00361 BSE0020 8881 0626315287
MAP27-03 03:01 00361 BSE0020 8881 0626315287
5.00 5.00
200.00 SWH
PHOTOGRAPH
No

BINS Bank		Savings Account Withdrawal	
Date	Driv. Lic. #	Amount	Signature
7/27/2013	50172843	400.00	SWU
7/27/2013	2.75mmt		442
Daren L. Bartlett		GOTOWABLE Withdrawals may be made only through payment to the depositor.	
3431 P. o. Box 101	Four hundred and三十 10.00	\$	
Account Number		APR03-03 09:15 00361 8500020 9302 0626438204	
626439204		400.00 SWU	

Regions Bank		Savings Account Withdrawal		Date <u>04/01/03</u>
<u>Damon L. Barnett</u> <u>937 Picmont Ct.</u>		Driv. Lic. # <u>3070843</u> Signature <u>Damon L. Barnett</u>		Amount <u>169.00</u>
Name on account <u>None</u> Address <u>None</u>		Amount received <u>None</u>		
<small>NOT NEGOTIABLE: Withdrawals may be made only through payment to the depositor.</small>				
Account Number <u>626438204</u>		Account Number <u>169.00</u>		
<small>APR01-03 09:23 00361 BSFF0020 9071 0626438204</small>				